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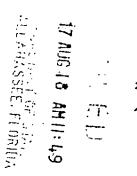
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COVER LETTER

Division of Cor			
SUBJECT:		ERTY MAN	AGEMENT LLC
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>ORYAN</u>	Name of Person	<i>V</i>
	_ORSi	PROPERTY MA	-NAGEMENT LLC
	183	13TH STR	EET
	APALA	CHTCOLA City/State and Zip Code	EE1 FL 32320
	Or VSDe E-mail jddress: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Oryan Name o	TPerson P C C($\frac{1}{\text{Area Code}} = \frac{24}{\text{Daytim}}$	14-7949 ne Telephone Number
Enclosed is a check for the			
525.80 Filling For	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ORS PROPERTY (Name of the Limited Liability Company (A Florida Limited Liab	MAVA (EMENT LLC as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company we Florida document number $\underline{CC2565713281}$	(Name of the Limited Liability Chupany as if now appears on our records.) (A Florida Limited Liability Company) (A Florida Limited Liability Company) icles of Organization for this Limited Liability Company were filed on MARCH 27, 2017 and assigned document number CC 256571328 endment is submitted to amend the following: mending name, enter the new name of the limited fiability company here: name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" ew principal offices address, if applicable: and office address MUST BE A STREET ADDRESS) we mailing address, if applicable: a address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records. Some of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	.	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered offic	in the second se	
registered agent and/or the new registered office address here:		
Name of New Registered Agent:	**	
New Registered Office Address:	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code	

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> Name Type of Action ELLA SPEED 183 WILLE SPEED BURNED AND AMBR ARALACHICOLA, FL 32320 KREMOVE _□ Change □ Add ☐ Remove □ Change ____ 🗆 Remove \square Add ☐ Remove ☐ Change D Add ☐ Remove

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